

2014

Public Health - Seattle & King County TEMPORARY FOOD SERVICE APPLICATION

New! Now you can apply on-line at http://www.kingcounty.gov/healthservices/health/ehs/portal.aspx

TYPE OR PRINT LEGIBLY- DUE AT DISTRICT OFFICE AT LEAST 14 DAYS PRIOR TO EVENT

	Temporary Event Permits Serving food at a special event for 21 days or less.						For Office Use Only		
demonstr	Limited Temporary Event Permits (includes sampling/demonstration-no raw oysters, raw milk, melon or cooking raw meat/poultry/fish.)						Permit No. (Service Request No.)		
	Late fees apply to both Limited Temporary and Temporary Event Permits.						Inspection Code (District)		
\$50 Late Fe	Late Fee, application made 3-5 days prior to the event.								
	Late Fee , application made 1-2 days prior to event must be submitted in-person and requires supervisor approval.						(Account Rec. ID)		
\$ Total							Invoice	No.	
1. Name of Booth:		Cor	ntact Per	son:			Email:		
Home Address:		City			Zip:		Phone: ()	
2. Event:			ent Coord	linator:	•		Phone: ()		
Event/Address		City	y:			Zip:	· ,		
Event Dates:				I	Event Hou	ırs:			
Is this your first time at this evo	ent?								
3. Where is the food prepared and	stored? Wha	t agency	permits	the loca	ation? No	home sto	rage of fo	ods is allo	wed
Facility Name:	A								
		ddress:			City:			Zip:	
Permitting Agency:				es and T	City: imes Kito		d:	Zip:	
Permitting Agency: 4. MENU (include beverages and all e			Date		imes Kito	chen Use		-	
·	xtra ingredients	s served v	Date	tem) and	imes Kito	chen Use		-	
4. MENU (include beverages and all 6	xtra ingredients	s served v	Date with each is uires at the cook/	tem) and	imes Kito	chen Use		-	storage
4. MENU (include beverages and all east of a) Check which preparation process FOOD 1.	extra ingredients	s served v	Date with each is uires at the cook/	REST	Simes Kito PREPAR AURAN' cold	chen Use ATION T:	PROCEI	DURES:	storage
4. MENU (include beverages and all each a) Check which preparation process FOOD 1. 2.	extra ingredients	s served v	Date with each is uires at the cook/	REST	Simes Kito PREPAR AURAN' cold	chen Use ATION T:	PROCEI	DURES:	storage
4. MENU (include beverages and all east of the comparison of the c	extra ingredients	s served v	Date with each is uires at the cook/	REST	Simes Kito PREPAR AURAN' cold	chen Use ATION T:	PROCEI	DURES:	storage
4. MENU (include beverages and all east of a) Check which preparation process FOOD 1. 2. 3.	thaw	item requested views item requested cut/assemble	Date with each i uires at the cook/ bake	cool	Simes Kito PREPAR AURAN' cold	chen Use ATION T:	PROCEI	DURES:	storage
4. MENU (include beverages and all each of the comparison process) FOOD 1. 2. 3. 4. b) Check which preparation process FOOD	thaw	item requested views item requested cut/assemble	Date with each i uires at the cook/ bake	cool	Simes Kito PREPAR AURAN' cold	chen Use ATION T: reheat	PROCEI	DURES:	storage
4. MENU (include beverages and all each of the comparison of the c	thaw ure each item re	cut/ assemble	Date vith each is uires at the cook/bake	cool OTH:	imes Kito PREPAR AURAN cold holding	chen Use ATION T: reheat	PROCEI	portion/package	storage
4. MENU (include beverages and all each of the comparison process) FOOD 1. 2. 3. 4. b) Check which preparation process FOOD	thaw ure each item re	cut/ assemble	Date vith each is uires at the cook/bake	cool OTH:	imes Kito PREPAR AURAN cold holding	chen Use ATION T: reheat	PROCEI	portion/package	storage

	5. How will you provide temperature control for prods must be 41°F or colder, or 135°F or hott							
	Hot holding: steam table, oven, BBQ, gas grill, w	ok, steamers, stove, hot	holding case, other (list)					
Reheating or cooking: oven, BBQ, gas grill, wok, steamers, stove, other (list)								
	Cold holding: refrigerator, refrigerated truck, refr	reezable ice/cooler, dry ic	ce/cooler, drained iced, freezer, other (list)					
	During Transport:							
6.	Describe booth:							
	Floor Roof		Walls					
Wa wea the	alls and ceiling must be made of wood, canva ather. Floors must be made from a cleanable booth.	s, or other material th material, not grass or	at protects the interior of the booth fro dirt. All activity and food storage mu	om dirt and st fit inside				
AD	DITIONAL REQUIREMENTS:							
1.	Provide a gravity flow handwashing facility in your booth. This consists of an insulated container with a spigot that can lock in open position – capacity of 5 gallons or more filled with warm water about 100°F, a tub or bucket for waste water, pump soap and paper towels. Check the handwash facilities throughout the day and refill when needed. WASH HANDS FREQUENTLY!							
2.	No bare hand contact with ready to eat foods	s. No sick food worker	rs present.					
3.	Provide sanitizer solution for wiping cloths.	This solution consists	of 1 teaspoon of bleach per gallon of w	ater.				
4.	A digital stem thermometer is required if you	u serve potentially haz	ardous foods. Check temperatures frequ	iently.				
5.	Foods prepared, cooked or displayed on the fi	ront counter must be p	rotected with a sneeze guard.					
6.	Have copies of food worker cards in the boot	th.						
7.	Provide water from an approved source.							
8.	Dispose wastewater in a sanitary sewer. Dis	posal of wastewater in	storm drains or on the ground is not all	lowed.				
9.	Provide restrooms for your employees. Res HANDS BEFORE RETURNING TO THE I facilities with hot water, soap and paper towe	strooms must have han BOOTH. (Portable toilels are provided.)	nd sinks with hot and cold running war lets are not allowed, unless portable has	ter. WASH nd washing				
10.	Provide plumbed dishwashing facilities if your For large events the event coordinator may salso be provided. Dish tubs are not acceptable.	ou are preparing food supply a three compart sle.	at the event or if the event is more that ment sink for you to use. Soap and sar	n one day. nitizer must				
11.	All food, single service utensils, napkins, etc.	., must be stored off th	e ground and under cover.					
12.	Permit fees may only be refunded if the appli otherwise provided in BOH 2.10.100. An a Fees are not transferable.							
L O	OUR APPLICATION MUST BE RECEIVED A LESS THAN 1-2 DAYS PRIOR TO THE EVENT DINCE THE APPLICATION IS APPROVED, NO DIFFICER. UNAUTHORIZED CHANGES MAY	MAY NOT BE APPRO CHANGES MAY BE	OVED OR THE MENU MAY BE RESTI MADE WITHOUT APPROVAL BY TH	RICTED.				
	nature of Operator gning this application indicates that all guidelines wi		nature of Health Officer					
Ver	rified permit and operational information with		Date:					
	Please submit your application to							

14350 S.E. Eastgate Way Bellevue, WA 98007 (206) 296-9791

Eastgate Way

e , WA 98007

Eastgate Way

Ea (206) 263-9566

New! Now you can apply on-line at http://www.kingcounty.gov/healthservices/health/ehs/portal.aspx